



California Commission on Aging

Healthy and Purposeful Longevity
For All Californians

2020 May Revise Budget Talking Points

The Governor's Executive Order N-14-19 established the Master Plan for Aging Stakeholder Advisory Committee and called for a Master Plan for Aging by October 2020, acknowledging that "...all older adults, and those with disabilities, should be able to choose to remain in their communities as they age, and whereas meaningful choice requires access to a broad range of public and private programs, resources, and supports, including health, homecare, food and nutrition, human services, housing and transportation..."

However, the May Revision of the State Budget (May Revise) proposals undermine the entire purpose of a Master Plan for Aging by both reducing funding and eliminating state programs that protect low income, frail older adults, individuals with disabilities and their caregivers.

The following proposals are included in the Governor's May Revise:

- Elimination of Community-Based Adult Services (CBAS) program
- Elimination of Multi-Purpose Senior Services (MSSP)
- Reductions in funding for Senior Nutrition, the Long-Term Care Ombudsman, the Aging & Disability Resource Connection programs and Independent Living Centers
- Elimination of the budget augmentation for Caregiver Resource Centers
- Restrictions in Medi-Cal eligibility and loss of optional benefits for older adults and persons with disabilities and cuts to monthly SSI/SSP benefit levels

Californians over the age of 65 account for over 79% of total COVID-19 deaths; 42% of the deaths are related to skilled nursing facilities.

Despite older adults being the most impacted group during the COVID-19 crisis, May Revise targets the very programs that allow them to stay safely in their homes.

Slashing the programs that help older Californians stay in their homes and stay healthy appears both ageist and shortsighted.

Without these cost-effective home and community-based services, older adults will have no access to the care and case management services they need.

Because there are few nursing home beds available – and even fewer Medi-Cal beds, family members will be forced to leave their jobs to provide care or older adults will be left to struggle alone – or die – in their homes.

Maintaining cost-effective, community-based health and social service programs and access to healthcare during a pandemic is more critical now than ever.

Any savings from making these cuts will be outweighed by the costs of care when these individuals are hospitalized or placed in nursing homes.

Sending the elderly into nursing homes before the COVID-19 pandemic is behind us could literally be a death sentence.

Elimination of MSSP and CBAS, without an alternative, is a direct violation of the 1999 Supreme Court Olmstead Decision, which affirmed individuals with disabilities of all ages have a right to receive state funded services and supports in the community rather than institutions.

The Department of Health Care Services (DHCS) proposes to replace these effective, evidence-based programs with a new, as-yet-to-be developed Long Term Care at Home program by 2021.

Given past experience in developing the Coordinated Care Initiative, the proposed timeline for CMS to approve DHCS' new Long Term Care at Home Medi-Cal State Plan Benefit by December 2020 is unrealistic.

DHCS has previously stated that California must first demonstrate these benefits can be provided statewide before they can become a CMS-authorized State Plan Benefit. The infrastructure to provide these services does not currently exist statewide, and managed care organizations lack expertise in providing home and community-based services.